

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin: 5px 0;">(to be used for all correspondence after initial filing)</p>	Application Number	10/823,093-Conf. #3154	
	Filing Date	April 12, 2004	
	First Named Inventor	Timothy M. Swager	
	Art Unit	1796	
	Examiner Name	D. S. Metzmaier	
Total Number of Pages in This Submission	3	Attorney Docket Number	M0925.70143US00

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <div style="margin-left: 20px;"><input type="checkbox"/> Fee Attached</div> <input type="checkbox"/> Amendment/Reply <div style="margin-left: 20px;"><input type="checkbox"/> After Final</div> <div style="margin-left: 20px;"><input type="checkbox"/> Affidavits/declaration(s)</div> <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <div style="margin-left: 20px;"><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53</div>	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <div style="margin-left: 20px;"><input type="checkbox"/> Landscape Table on CD</div>	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; margin-top: 5px;"></div> Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	WOLF, GREENFIELD & SACKS, P.C.		
Signature	/Timothy J. Oyer/		
Printed name	Timothy J. Oyer, Ph.D.		
Date	11/16/10	Reg. No.	36,628

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I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filing system in accordance with § 1.6(a)(4).	
Dated: <u>November 16, 2010</u>	Signature: <u>/Danielle Calder/</u>